### UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

### Birim Group, LLC

A California Limited Liability Company, Assignee,

Plaintiff,

VS.

Paa Kwesi Nduom, a.k.a. Dr. Paa Kwesi Nduom, Papa Kwesi Nduom, Kwesi P. Nduom, an individual; GN Bank, an Illinois Federally-chartered Financial Institution; International Business Solutions, LLC, a Virginia Limited Liability Company; GROUPE NDUOM USA LLC; a Nevada Company; GN USA LLC, a Nevada Company; GN Money, LLC, a Nevada Company; Groupe Nduom, a Ghana Company; GN Bank, a Ghana Company; Gold Coast Fund Management, a.k.a. Blackshield Capital Management, a Ghana Company; Yvonne Nduom, an individual; Nana Kweku Nduom, an individual; Edjah Nduom, an individual, Nana Aba Nduom, an individual; Robert Klamp, an individual; James L. Buckner, an individual; Lisa Finch, an individual; Francis Baffuor, an individual; William C. Goodall, an individual; Donald Davidson, an individual and DOES 1 through 100, Inclusive,

Defendants.

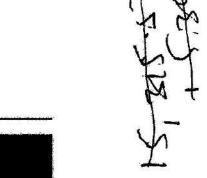
**CASE NO.:** 1:20-cv-07198

**EXHIBIT B** 









## ATION FORM

## INDIVIDUAL

THAME O	
STECKS	/ SHARES
COLLEC	FIVE INVESTMENT SCHEME (CIS)
BANK O	F GHANA / GOG TREASURY PAPER
PRIVATE	ASSET MANAGEMENT
OTHERS	
- M (2.08	
SURNAME:	AMANPENE-SEKYERE
FIRSTNAME:	MAVIS
OTHERS:	
BRANCH:	
ACCOUNT NU	MBER:

Phone.:+233 30-290-2068 / +233 30-221-1411 / +233 50-141-0497 Emell: info@grimghana.com Head Office Address:

C625/3 Fourth Crescent Road Asylum Down

Accra - Ghana

Case: 1:20-cv-07198 Document #: 1-2 Filed: 12/04/20 Page 3 of 7	ACCOUNT L' FRISTIN
Personal  Joint Application  ITF in trust for ages below 18 years	PEP RP: High
(2) YOUR PERSONAL INFORMATION	Low
FIRST APPLICANT Gender: Male Female	
Title Mr. Mrs. Dr. Other:	
Surname (Last Name) AMANPENE-SEKYERE	PASSPORT PICTURE
First/Others Names: MAVIS	
Date of Birth: 0 1 Married DD/MMVYY Marital Status: Single Divorced Married Wildowed	
Nationality: GHANA (AN) Country of Residence: GHANA	
Mobile Phone: 02006 Residential Phone: 0302	
Postal Address:	
Residential Address:	
Email: RICHMA	
Mother's Maiden Name:	
	cation attained
	Diploma Graduate
Valid Photo ID:   Voter's ID □ National ID □ Driver's License □ Passport □ Other	-
ID Number Date of Expiration:	DD/MM/YY
	Domination 1
THE ACCOUNT BEING APPLIED FOR IS	
Joint Application ITF in trust for ages above 18 years	
Joint Application  ITF in trust for ages above 18 years  SECOND APPLICANT	
Joint Application	PASSPORT
Joint Application   ITF in trust for ages above 18 years    SECOND APPLICANT  Title   Mr.   Mrs.   Ms.   Dr. Other:    Surname (Last Name)	
Joint Application   ITF in trust for ages above 18 years    SECOND APPLICANT  Title   Mr.   Mrs.   Ms.   Dr. Other:  Surname (Last Name)	PASSPORT
Joint Application   ITF in trust for ages above 18 years    SECOND APPLICANT  Title   Mr.   Mrs.   Ms.   Dr. Other:    Surname (Last Name)	PASSPORT
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# O EXISTING

### **GOLD COAST FUND MANAGEMENT**

MONEY MARKET INVESTMENT - STRUCTURED FINANCE FORM

Personal Details	A SUC CUCIELE	
	MANPHUE -SEKYFAL	
Client Account Number:	Sex: FEMA	· C
Date of Birth/Date of Incorporation: 67	Sex: FEMA	<u> </u>
Home Address (Location):	ANRI PORT-AC	CRA-
Postal Address: CO	, Are port- AC	CKA
385804326	& <u>,                                     </u>	
Personal ID Number:	Type of ID:	
Email address:		
Contact Phone (Office/Home): 0301	(Mobile): O2	
Transaction Details: Amount (in words): CHE HUNDE!	THOUSAND GHANA	CEDIS ONLY
Amount (in figures): GH¢ 100,000  Expected Return(per annum):	ా Cheque No./Cash:	
Instrument O 3D-Day O 6D-Day O Applied For:*	91-Day   1-Year   1-Year	2-Years
Investment		y on Maturity
Transaction & New Transaction	O Top Up On Maturity To TR	no
Options: Rediscount & Top Up To TR no	= 100 = 100 m/s = 100 m/s = 100 m/s	
Aman pane Sebyere Mayis 24/1/1/17	Signature:	Time: OO am
Official Use Only:	74.	
GC Receipt Number: Ac	count Deposited:	
Investment Date: / /	Investment Rate:	
Manager/Receiving officer Signature: Authorising Signature (CSM):		

5 Mozambique Link, Adj. Coconut Grove (Regency) P.O. Box GP 17187, Accra

Tel: 0302-211411

Email: info@gcsinvestments.com; Website: www.goldcoastfundmanagement.com

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YOUR BANK DETAILS
Please give details of your bank account
ame of Bankers:
Account Number:  Date this account was opened:  DD/MM/YY
Please inclicate which of the following cards you hold: Other Credit Card Other / Debit /Switch Card
Branch: Visa / Master Our Cheque / Switch Card
What is your total annual income (before tax and deductions) GHC  Please indicate across if your salary
is paid directly to your bank: Yes No When are you paid? eg. weekly, monthly, e.t.c.:
ITF Instructions (for ages below 18)
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Next of Kim Amagainst Selection  Relationship:
Next of Kim Amager Sety Research Phone Number:
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Next of Kin- Was plant Setyles  Relationship: Phone Number: 03-0  INX. COAST FUND MANAGEMENT LIMITED will fold securities for your or register and celluer them in your name Fyod with Mold securities for your convenience.  This eliminates the chance of loss facilities the collection and interest, provides you with dealed accounting of securities in your account.  Securities
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#### TERMS & CONDITIONS OF TRANSACTIONS

(Please read the following carefully before filling the Order Form. Sign and return it to the Receiving Official, only after you have satisfied yourself that you fully understand the provisions. Feel free to ask our Customer Support staff for any clarifications if necessary or contact the Manager)

1. Instructions: Tick the investment options that best suits your order, especially your instructions on the treatment of your discount (interest), relievers, etc.

#### 2.Rediscount |Redemptions:

A rediscount would attract a penalty on the interest accrued. This would be communicated to the customer.

Rediscounts would not apply to bills that would mature in a week or less. You may apply (fill a form) at the nearest GCFM office, attaching your original receipt and a valid national iD for a redemption or rediscount. To transact business via email you will be required to sign to a GCFM email indemnity clause alongside providing any document that will be requested for as may be deemed necessary

- 3.Notice: GCFM would require 3 working days notice on/before the maturity date for redemptions and rediscounts.
- 4. Settlements: Drafts /Cash are the narmal settlement instruments. The client bears all the risks involved in giving any instructions counter to this arrangement.
- 5.Agent: If you are buying for and on behalf of another person, group, or fund, your endorsement of the form will be deemed to represent the acceptance of the one on whose behalf you are making this commitment.
- 6.Disclosure Palicy: GCFM holds its Disclosure Policy sacred, and would take the time to explain all the risks, limitations, apportunities and facts about this investment you are about to make. However, we expect you to leave nothing to implied meaning; ask the receiving officer for any clarifications and information that you require to make a decision.
- 7. Note: All investments will be purchased on daily basis. However, investments with cheques would be set up after they have cleared.
- 8.Rollover Option: Weekly prevailing interest rates will be applied to all rollovers.
- 9. Please note that there is an administrative fee charged on both individual and corporate accounts.

### MANDATE

10.1/we NAUS AMARIES - SECTEME... have manufacted Gold Coast Fund Management to invest my/our funds an my/our behalf and I am/we are in agreement with all the terms and condition sighted herein.

SIGNATURE.

DATE 24 TA Novomed , 201

5 Mozombiane Link, Adj. Cocomut Grove (Regency)

P.O. Box GP 17187, Accra Tel: 0302-211411

Fmail: info@gesinvestments.com; Website: www.goldcoastfundmanagement.com

